

Reservation Form

West Carrollton High School Alumni Association Dinner/Dance

**Reservations REQUIRED
For Dinner**

**Saturday October 11, 2008
Holiday Inn - Dayton Mall
31 Prestige Plaza Miamisburg, Ohio
6 PM til Midnight**

**www.wchsalumni.org
sfshade@ameritech.net**

Female Graduate _____
Current Last Name Last Name at Graduation First Name Class

Male Graduate _____
Last Name First Name Class

Address _____
Street Address

**Would You Like Assistance Getting Your
Food From The Buffet Line?** _____

_____ City State Zip

_____ Phone

_____ Email address

**If you would like an email
confirmation of your res-
ervation, please include
your email address.**

___ Spouse _____
___ Guest Last Name First Name

Please reserve _____ places for the Dinner and Dance @ \$35.00 each place\$ _____

Please seat us with the Class of _____

**We Can Not
Guarantee Seating!**

Please seat us with the family of _____

"Dance Only" tickets _____ @ \$7.00 each..... \$ _____

Donation to West Carrollton Alumni Association..... \$ _____

Donation to Alumni Scholarship Fund..... \$ _____

Total Enclosed \$ _____

**Make Checks Payable To: West Carrollton Alumni Association
Mail No Later Than October 1st, 2008 to:
Gary Johnson (Treasurer) 2326 Wrencroft Cir Dayton, OH 45459-8411
Information-Denise Dorsey 937-439-9671
Enclosed is a self addressed envelope for your convenience**

I Can Help ___ Sell Raffle Tickets ___ Work At Festivals ___ Banquet Committee ___ Association Meetings

I Would Like To Nominate For Association Officer

President Vice-President Treasurer Secretary

Dining Preference ___ Sit Down ___ Buffet

Meal Preference ___ Dinner Menu ___ Luncheon Menu ___ Picnic/BBQ Menu

Pricing ___ Better Food/Higher Price ___ More Limited/Lower Price ___ About Same

Entertainment ___ Yes ___ No Type _____

Suggestions _____